

# Artistic Disciplines Dance, Film, Music, Theater, and Visual Arts Projects Grant Application 2010/2011

Non-Profit Organiza Name as it appears in a	
Federal ID#	
Mailing address	<del></del>
City	State Zip
Executive Director _	
Phone	Email
Name of Grant Write	er
Grant contact perso	n Title
Phone	Fax Email
Web address	
Program Discipline	(select one): Grant Amount Request Level (select one):
Dance	\$5,000 - for Cultural Ignition Program
Film	\$10,000 - for proposed project budgets under \$100,000
Music	\$20,000 – for proposed project budgets at or above \$100,000
Theater	
☐Visual Arts	
Proposed project tit	le
Project start date	Project end date
Total proposed proj	ect budget \$ Total proposed organizational budget \$
Is your organization	currently involved in litigation with the City of Miami Beach Yes No

### **Grant Proposal**

Please type in 12 point type and only in designated space.

**I. Organization's Mission (up to one page):** Please state the mission of your organization. Then describe the organization's strategic artistic development and achievements in relation to its mission.

**II. Project Summary (up to two pages)**: In narrative form please outline in detail the proposed presentation of new work in the City of Miami Beach. The narrative must include a statement that this work is new or has never before been presented in Miami Beach and include specific dates, times, venues, artists, target audience, incorporation of new technology and artistic collaborations. *Include the following required attachments behind your summary: Letters of intent from all artists appearing as guests with the applicant organization.* 

**Project Summary Page 2.** 

III. Artistic Mission and Goals (up to one page): Please describe how the proposed project directly supports the artistic mission and goals of your organization.	

IV. Marketing Plan (up to one page): proposed project.	Please outline in detail the marketing plan for the

**V. Project Evaluation (up to one page):** Describe your method of evaluating the project. Please specify the particular program offerings by date, venue, constituencies addressed, demographic profiles, etc. Include attendance figures for each performance from your previous season and address each point on the audience survey provided. (Attach a sample survey tool.)

VI. Board Management and Structure (up to one page): Please describe your Board management and structure, including required annual meeting dates. Then provide a detailed synopsis of your Board's current goals and objectives. Please attach current Board list with brief bios and current contact information of members behind this page (required).

VII. Organization's Administrative and Artistic Structure (up to one page). Please describe the organization's administrative structure which includes management and artistic staff. Please attach current administrative and artistic staff lists with bios attached behind this page (required). Also attach a copy of an organizational table, if available.

#### **FINANCIAL INFORMATION SUMMARY**

	Completed Fiscal Year (FY 2008/09)	Current Fiscal Year (FY 2009/10)	Proposed Fiscal Year (FY 2010/11)
Amount Requested/Awarded:		1	1
	(requested/awarded)	(requested/awarded)	(requested/awarded)
Total Proposed Project Budget:			
Total Organizational Budget:			

#### **ORGANIZATIONAL FUNDING HISTORY**

List all City of Miami Beach cultural grants your organization has received over the past three years.					
Fiscal Year	Grant Program Name	Project Name	Request/Award		

List funding for this project, both secure and pending, from all other sources.

Month/Year	Funding Source	Amount Requested	Amount Received

Other Funding Totals:
Please do not include City of Miami Beach Cultural Grant requested.

Requested \$

**Pending** \$

Received to Date \$

#### **PROJECT EXPENSE BUDGET**

List all project related expenses. Round amounts to the nearest dollar (do not show cents). Provide an additional sheet with an itemized budget for any items in the "Other Costs" category above \$5,000. NOTE: Total project expenses and revenues must equal.

	CASH EXPENSES	=	GRANT DOLLARS ALLOCATED	+	CASH MATCH (MIN \$1 TO \$1)	*In-KIND CONTRIBUTIONS
PERSONNEL						Ī
ADMINISTRATIVE: No. of EMPLOYEES:	<u> </u>		N/A			
ARTISTIC: No. of Artists:						
TECHNICAL: No. of EMPLOYEES:						
OUTSIDE ARTISTIC FEES: No. of ARTISTS:  OUTSIDE TECHNICAL FEES: No. of TECHNITIONS:						
MARKETING/PUBLICITY						
PRINTING						
POSTAGE						
IN COUNTY TRAVEL (PERFORMANCE RELATED ONLY)			N/A			
OUT OF COUNTY TRAVEL			N/A			
EQUIPMENT RENTAL						
EQUIPMENT PURCHASE			N/A			
SPACE RENTAL (PERFORMANCE RELATED ONLY)						
INSURANCE (PERFORMANCE RELATED ONLY)			N/A			
UTILITIES			N/A			
SUPPLIES/MATERIALS						
OTHER COSTS (ITEMIZE BELOW):						
		-		-		
GRANT AMOUNT REQUESTED						
TOTAL CASH EXPENSES		=_		<b>. +</b> <u>.</u>		
TOTAL IN-KIND CONTRIBUTIONS	*In-Kind Contrib Cash Expenses			eed	25% of Total	
TOTAL PROJECT EXPENSES \$	3	S	Sum of Cash	& In	ı-Kind	

\*In-kind contributions are the documented fair market value of non-cash contributions provided to the grantee by third parties which consist of real property or the value of goods and services. These figures are not included in budget calculations. Please note that In-Kind contributions may not exceed 25% of the total organizational budget and total cash project budget.

#### **PROJECT REVENUE BUDGET**

List all project related revenues. Round amounts to the nearest dollar (do not show cents). Provide an additional sheet with an itemized budget for any items in the "Other Revenues" category above \$5,000. NOTE: Total project expenses and revenues must equal.

	CASH INCOME	IN-KIND VALUE	In-KIND SOURCE
ADMISSIONS			
CONTRACTED SERVICES			
TUITIONS			
CORPORATE SUPPORT			
FOUNDATION SUPPORT			
PRIVATE/INDIVIDUAL SUPPORT			
GOVERNMENT GRANTS - (IDENTIFY SOURCE)			
FEDERAL			
STATE			
LOCAL			
APPLICANT CASH ON HAND			
OTHER REVENUES (ITEMIZE BELOW):			
GRANT AMOUNT REQUESTED (MUST EQUAL AMOUNT REQUESTED ON PAGES 1, 10 & 11)			
TOTAL CASH REVENUES (MUST EQUAL TOTAL CASH EXPENSES ON PG 11)			
TOTAL IN-KIND CONTRIBUTIONS (MUST EQUAL TOTAL IN-KIND ON PG 11)			
TOTAL PROJECT REVENUES (MUST EQUAL TOTAL PROJECT EXPENSES ON PG 11)	\$		Sum of Cash & In-Kind

#### **ORGANIZATIONAL BUDGET**

#### ATTACH ITEMIZED IN-KIND CONTRIBUTIONS LISTS (3 YEARS) ATTACH BEHIND THIS PAGE

FISCAL YEAR (MONTH/DAY): TO

	PROPOSED	CURRENT	COMPLETED
<u>Expenses</u>	FY -	FY	FY
PERSONNEL - ADMINISTRATIVE			
PERSONNEL – ARTISTIC			
PERSONNEL - TECHNICAL			
OUTSIDE ARTISTIC FEES/SERVICES			
OUTSIDE OTHER FEES/SERVICES			
MARKETING/PUBLICITY			
TRAVEL/TRANSPORTATION			
EQUIPMENT RENTAL			
EQUIPMENT PURCHASE			
SPACE RENTAL			
UTILITIES			
REMAINING OPERATING EXPENSES			
TOTAL CASH EXPENSES			
IN-KIND CONTRIBUTIONS - MAY NOT EXCEED 25% OF THE TOTAL ORGANIZATION BUDGET - ATTACH ITEMIZED LIST EACH YR.			
		1	<u> </u>
TOTAL EXPENSES		•	
REVENUES ADMISSIONS			
CONTRACTED SERVICES			
Tuitions			
CORPORATE SUPPORT			
FOUNDATION SUPPORT			
PRIVATE/INDIVIDUAL SUPPORT			
GOVERNMENT GRANTS - FEDERAL			
GOVERNMENT GRANTS - STATE			
GOVERNMENT GRANTS - LOCAL			
APPLICANT CASH ON HAND			
OTHER REVENUES			
TOTAL CASH INCOME IN-KIND CONTRIBUTIONS - MAY NOT			
EXCEED 25% OF THE TOTAL ORGANIZATION BUDGET - ATTACH ITEMIZED LIST EACH YR.			
TOTAL INCOME			

## REQUIRED ATTACHMENTS – please attach as indicated to the application and all application copies.

Attach within application:

- ✓ Letters of Intent from all artists appearing as guests with the applicant organization referenced in your project summary.
- ✓ Current Board membership (with contact information) and staff lists with brief bios included
- ✓ All Itemized in-kind contribution lists as indicated on the organizational budget page. In-Kind contributions may not exceed 25% of the total organizational budget. In-kind contributions are the documented fair market value of non-cash contributions provided to the grantee by third parties which consist of real property or the value of goods and services.

#### Attach at end of application:

✓ Additional supplemental organizational and program materials are limited to 5 pages front and back.

One copy only required for Cultural Affairs Program Files

- Organization's most recent fiscal year IRS Form 990 (attach to the signed original application).
- ✓ A copy of your 501(c)(3) letter of determination, dated within the past two years. Updated letters can be obtained from the Internal Revenue Service via fax and mail at 1-877-829-5500.

**Please note:** All organizations must be registered as Lobbyists with the City of Miami Beach City Clerk's office prior to presenting to the Grant Panelists. Non-profit organizations are exempt from paying the fee but must still register. For more information, please call 305-673-7411 or visit <a href="http://www.miamibeachfl.gov/newcity/depts/clerk/clerk.asp">http://www.miamibeachfl.gov/newcity/depts/clerk/clerk.asp</a>.

#### **CERTIFICATION / SIGNATURE**

I certify that all information contained in this application and attachments are true and accurate, and that I am authorized by the applicant hereto to execute this application.

Name		Title	
	(Please Print)		
Signature			_ Date

All funded activities must provide equal access and equal opportunity in employment and services and may not discriminate on the basis of disability, race or ethnicity, color, creed, national origin, religion, age, gender, or sexual preference, in accordance with Title VI and Title VII of the Civil Rights Act of 1964, the Age Discrimination Act of 1975 and Title IX of the Education Amendments of 1972 as amended (42 U.S.C. 2000d et seq.), the Americans with Disabilities Act (ADA) of 1990, and Section 504 of the Rehabilitation Act of 1973.

Grantees must include the following credit line in all promotional and marketing materials related to this grant including news releases, public announcements, press releases, print and broadcast media: "With the support of the City of Miami Beach Department of Tourism and Cultural Development, Office of Cultural Affairs, and the Miami Beach Mayor and City Commissioners." Grantees are also required to use the City of Miami Beach logo in marketing and publicity materials. Logo files are available at <a href="https://www.mbculture.org">www.mbculture.org</a> under <a href="https://www.mbculture.org">Grantees</a>.

The City of Miami Beach provides equal access and equal opportunity in employment and services and does not discriminate on the basis of race or ethnicity, color, creed, national origin or religion, age, gender, sexual preference, in accordance with Title VI and Title VII of the Civil Rights Act of 1964, the Age Discrimination Act of 1975 and Title IX of the Education Amendments of 1972 as amended (42 U.S.C. 2000d et seq.). The City of Miami Beach Department of Tourism and Cultural Development, Office of Cultural Affairs, supports and advocates compliance with the requirements of the Americans with Disabilities Act (ADA) of 1990, and Section 504 of the Rehabilitation Act of 1973 which prohibit discrimination on the basis of disability.